

#7  
An Inaugural Dissertation

on

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Apoplexy

by

Charles J Edwards

of

Virginia

April 19<sup>th</sup> 1811

Journal of the Expedition

The first day of the expedition was spent in the  
forest. The weather was very warm and the  
ground was very dry. The trees were very tall  
and the leaves were very green. The birds were  
very noisy and the insects were very numerous.

The second day of the expedition was spent in the  
forest. The weather was very warm and the  
ground was very dry. The trees were very tall  
and the leaves were very green. The birds were  
very noisy and the insects were very numerous.

The third day of the expedition was spent in the  
forest. The weather was very warm and the  
ground was very dry. The trees were very tall  
and the leaves were very green. The birds were  
very noisy and the insects were very numerous.

The apoplectic state of Fever. 1

It appears I think and not without foundation that there is no disease to which we are subject that requires more speedy and prompt remedies than that of Apoplexy.

This disease according to Dr<sup>h</sup> Rush consists in a total or partial suspension of voluntary motion together with the external and sometimes internal senses, resembling very much the sleeping and intoxicated states of the system, but from which, may and ought to be distinguished, as it is of considerable practical importance. From the former it may be known by wakefulness being produced on the application of external stimuli to any one of the senses, which





is not the effect produced when applied to persons labouring under Apoplexy. From intoxication it is not so easily distinguished, but may be, by the smell of the breath and the life which the person leads.

The opinions of Authors on this subject, appear to be, that it attacks in the evening of life or generally about the age of sixty, and Dr. Cullen among the rest, who has in my humble opinion descended to as much minutia as any other author who has ever treated on the disease; but for my single self cannot pretend to say, as the cases, which came under my Preceptor's care during the last summer and which I had the satisfaction of seeing, were all cases in persons from seventeen to

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burning under the microscope. Some interesting  
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human body.  
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to thirty four.

The remote causes, of this disease, are intemperance in eating and drinking, loud and long speaking often produces it, for frequently we see Clergymen and Speechmakers affected with it, we very often see Apoplexy the effect of a diseased stomach from the great reciprocal sympathy of those parts, suppressed hemorrhoids has caused it, also suppressed discharges of blood from different parts of the body, the drying up of old sores and eruptions has been a frequent cause of this disease, the stoppage of a periodical return of gout has produced it, which in one case I myself have witnessed, great exercise of the body particularly with the head in a depending position, this I saw also produce it in five



blacks from cutting tobacco which required great bodily exertion and at the same time the head to be much depended. Dr. Rush says he has seen it produced in a palsy in two cases from a difficulty in stooping, we see it often produced by the inhalation of impure gases derived from crowded assemblies, a neglect of usual bleeding, lightning and such like causes have produced it.

Dr. Cullen says that the proximate cause of this disease is compression of the brain, producing a loss of mobility of nervous power from an over distention of the vessels of this organ or from an effusion of serum or blood itself from the vessels in consequence of excessive action or distention of them; but Dr. Rush draws no distinction between the proximate



cause and disease itself. If he does draw a distinction, it is in my humble opinion an imperceptible one.

We see from further reading of W.<sup>o</sup> Cullen, that he  
 ✓ took great pains to distinguish diagnostically and  
 ✓ specifically the difference between what he calls the  
 ✓ serous and sanguineous apoplexy, but this I conceive  
 to be very difficult and in a practical point of view  
 of very little importance. He also taught that the  
 ✓ serous did not require bloodletting and if adhered  
 to by his followers no doubt their practices are at-  
 tended with considerable fatality. —

Before proceeding to the treatment of this dis-  
 ease, I deem it proper and suppose its requisite  
 that the premonitory <sup>symptoms</sup> should be given, which are  
 as follows, drowsiness, stupor, elevated excitement in





in the brain, partial blindness and deafness, giddiness, headache, vertigo, numbness of one or sometimes of both the lower extremities, suppression of discharges from different parts of the body.

Women are not so subject to this disease as men, on account of their menstrual discharges, but when these are suppressed or obstructed, this disease is not unfrequently the consequence.

I now proceed to mention the cure of this disease, the object of which should be to abstract, translate diminish the excitement of the brain with as much speed as possible. When called to a person attacked with this disease in a crowded room, the persons present should immediately be dismissed, or else the patient should be



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be removed from it, with a view to prevent  
an accumulation of those gases, which if  
they had not produced might add to the  
productiveness <sup>cause</sup> of this disease.

The next thing to be done is bloodletting. In  
doing this the patient should be placed on a  
chair if able to sit up and if not able, should  
be supported in bed with the head as much  
elevated as possible, with a view to accelerate  
the return of venous blood.

The Physician is now to draw blood either from  
both arms or from the jugulars. The greater the  
quantity of blood drawn in a short time so  
much the better. The next thing proper is the  
exhibition of a cathartic and if this is not suf



sufficient to produce a copious evacuation,  
an injection should also be given.

These last mentioned remedies are among  
the most valuable to which we can have re=  
course, and their exhibition should by no means  
be neglected.

They act by revulsion, abstraction, and transla=  
tion of morbid excitement from the brain.

The head should now be shaved and cold  
applications made of water or ice confined in  
a bladder, blisters or sinapisms should be applied  
as soon as the excitement of the system is suf=  
ficiently reduced to admit of their action. --

They should be applied between the shoul=  
ders and to the extremities. --





The before mentioned remedies are not always requisite in cases of Apoplexy, for in many attacks of it we see the system in the commencement of the disease completely prostrated from excess of action, as is the case from a large dose of laudanum, marsh exhalations and such like acting substances taken internally, lightning and electricity also produce this state of the system.

The brain on dissection in <sup>these</sup> ~~the~~ exhibits no marks of inflammation in consequence of its not being able to react on account of excitement transcending the point of disease or inflammation.

D<sup>r</sup> Rush very happily compares this state of the system to the oak shattered by lightning only.

The first of these is the fact of the  
 existence of the human mind, and the  
 fact that it is not a mere collection of  
 ideas, but a living, thinking, feeling  
 entity. The second is the fact that the  
 mind is not a passive receiver of  
 impressions, but an active agent in  
 the process of knowledge. The third  
 is the fact that the mind is not a  
 mere instrument, but a power, and  
 that it is capable of creating new  
 ideas, and of modifying old ones.  
 The fourth is the fact that the mind  
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to be raised by the hand of art (stimuli.)

If this occurrence be produced by laudanum &c taken internally the patient if possible should be made puke it up by giving an emetic and if not able to swallow, we should try mechanical means, such as tickling the throat with a feather and friction on the abdomen with the former of these D<sup>o</sup>. Barry succeeded when every thing else in his hands failed, cloths wet with warm water and applied to the abdomen, have succeeded when other remedies have failed.

D<sup>o</sup>. Rush says he has known flagellation to succeed in the hands of a New York practitioner after he had tried unsuccessfully all



all other remedies; this says the Do<sup>or</sup> was owing to the stimulus of the remedy transcending that of the Opium, &

This is the treatment of this disease according to the best opinions of authors on the subject, to wit Do<sup>ors</sup> Cullen, Sydenham and Rush, and hope it is sufficient.

I will now notice in as concise and explicit manner as possible the prophylactics of this disease and then conclude.

It is in the majority of instances an easy matter to prevent an occurrence of this disease in persons predisposed to it, causing them to live low, keep the bowels well open, which I think one of its greatest preventives, preventing all diseases of the stomach, straining at stool, sleeping with the head lower



than the other parts of the body should be forbidden, the establishment of setons in the back of the neck is a remedy very worthy of notice, old sores, if dried up, should be renewed, the feet when cold should be warmed by stimulating applications. Here we should believe that the feet become cold in consequence of the increased action of the bloodvessels of the brain, and for that reason particularly, we should be as prompt in our applications as possible, gentle exercise appears to be almost indispensably requisite for the prevention of this disease and finally all those causes, which produce either directly or indirectly an increased action of or determination to the bloodvessels of the brain, should be avoided.





The raging disposition of this disease may almost always be strangled in its attempts to progress by the lancet and therefore like the celebrated Darwin we should learn to carry it in our pockets.

With this I conclude my short and imperfect dissertation. It not doubt will be viewed with impartiality and judged worthy a seat in oblivion, which no doubt it merits.

But before I finally conclude (and it is with considerable regret that I do,) I must return my sincere thanks to the professors of this University for the knowledge which I have derived from their lectures, and hope <sup>that</sup> time may encircle their tombs with wreaths of honor and future generations do justice to their



to their highly merited fame.

Charles J. Edwards—

Dear Sir,  
I have the honor to acknowledge the receipt of your letter of the 10th inst. in relation to the above named matter. I am sorry to hear that you are not satisfied with the result of the investigation. I have, however, no objection to your making such use of the facts as you may think proper.